

BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO.	FILING DATE					
						APPLICANT(S)						
CLAIMS						*	*	*				
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1	/						51					
2	/						52					
3	/						53					
4	/						54					
5	/						55					
6	/						56					
7	/						57					
8	/						58					
9	/						59					
10	/						60					
11	/						61					
12	/						62					
13	/						63					
14	/						64					
15	2						65					
16	2						66					
17	/						67					
18	/						68					
19	/						69					
20	2						70					
21	/						71					
22	2						72					
23	/						73					
24	/						74					
25	/						75					
26	/						76					
27	/						77					
28	2						78					
29	4						79					
30	/						80					
31	/						81					
32	/						82					
33	/						83					
34	2						84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	7						TOTAL IND.					
TOTAL DEP.	310						TOTAL DEP.					
TOTAL CLAIMS	413						TOTAL CLAIMS					

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS